	_	٦	1
•		÷	t
٠,		1.	г



750 Chase Parkway, Waterbury, CT 06708 www.nv.edu



2016-2017 Course Enrollment Form Parent Consent Form

In order to enroll you in the CCP course, this form must be filled in completely and accurately.

Student Name:(use full legal name)			Date:	
Banner ID: @	Date of Birth:		_Social Security #:	
(@ #######) if you have an ID number	(mm/dd/yyyy)		(###-##-###)	
Address:				
City:		State:_	Zip Code:	
Gender : □ Male □ Female	Home Phone:		Cell Phone:	
E-Mail Address:	Nan	ne of Parent/Guar	dian:	
Name of High School:		Grade:	Graduation Date:	
CCP Course(s) to Be Taken All courses are not available at all high schools. Plea		cademic year.		
High School Course Title	College Course	Title		Number of Credits
I am agreeing to enroll in the Col and that receiving college credit				re collegiate courses,
Student Signature:			Date:	
I am giving my son/daughter/cus	todial child permission to	enroll in the College	Career Pathways course(s) indicated above.
Parent/Guardian Signature:_ (Required)			Date:	
Please return this form to y	our high school teach . Forms due to NVCC			·